

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450

Alexandria, Virginia 22313-1450

(703) 746-4000 or Fax

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks I through 5 should be completed where

	E ADDRESS (Note: Use Block 1 fo		~ \	Note: A certificate of Fee(s) Transmittal. The	f mailing can only be used f his certificate cannot be used	or domestic mailings of the for any other accompanying
000513 75	590 03/17/2005	17 2015	13	papers. Each addition have its own certificat	al paper, such as an assignmente of mailing or transmission.	ent or formal drawing, mus
	LIND & PONACK	1.13/18. I	į.	Cu	rtificate of Mailing or Tran	emickian
2033 K STREET N		14	at.	I hereby certify that t	his Fee(s) Transmittal is bein with sufficient postage for fir il Stop ISSUE FEE address YFO (703) 746-4000, on the	ng deposited with the United
SUITE 800		ENT& TRADEM		addressed to the Ma	il Stop ISSUE FEE address	s above, or being facsimil
WASHINGTON, I	DC 20006-1021				PTO (703) 746-4000, on the	
	THE CO	MMISSIONER IS	AUTHORIZ	EU		(Depositor's name
	TO CHA	rge any DEFICI	IFUCA IN TH	lt		(Signatore
	FFF FOI	R THIS PAPER TO	O DEPOSIT			(Date
APPLICATION NO.	FILING DATECOU	NT NO. 23-0975	RST NAMED	INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/769.795			Piii Okaba		2004-0141A	9246
•	IQUID CRYSTAL COMPO	DSITION AND LIOU	UID CRYSTA	L DISPLAY ELEMENT	/20/2005 YPOLITE2 000	00006 10769795
	-	<u>.</u>		01	FC:1501	1400.00 OP
,	•			į 02	FC:1504	300.00 OP
APPLN. TYPE	SMALL ENTITY	ISSUE FE	EE T	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	L	\$300	\$1700	06/17/2005
	<u>. </u>				7	
EXAMINER		ART UNIT		CLASS-SUBCLASS	_	
WU, SHE	AN CHIU	1756		428-001100		
Change of correspondence	e address or indication of "F	ee Address" (37	2. For printi	ng on the patent front page, l	ist WENDE	ROTH, LIND
FR 1.363).				- 1 1 1 7 1	1	
			(1) the name	es of up to 3 registered pate	nt attomeys 1————————————————————————————————————	NACK, L.L.P.
Change of correspond	dence address (or Change of 22) attached.	Correspondence		es of up to 3 registered pate R. alternatively.		NACK, L.L.P.
	dence address (or Change of 22) attached. tion (or "Fee Address" Indic		(2) the name	e of a single firm (having as	a member a 2	NACK, L.L.P.
"Fee Address" indicate PTO/SB/47; Rev 03-02	lence address (or Change of 22) attached. tion (or "Fee Address" Indic or more recent) attached. Us		(2) the name	e of a single firm (having as	a member a 2	
"Fee Address" indicate PTO/SB/47; Rev 03-02 (Number is required.	tion (or "Fee Address" Indic or more recent) attached. Us	ation form se of a Customer	(2) the name registered at 2 registered listed, no na	e of a single firm (having as storney or agent) and the nar patent attorneys or agents. It me will be printed.	a member a 2	
"Fee Address" indicate PTO/SB/47; Rev 03-02 of Number is required. ASSIGNEE NAME AND	tion (or "Fee Address" Indic or more recent) attached. Us O RESIDENCE DATA TO 1	ation form se of a Customer BE PRINTED ON TI	(2) the name registered at 2 registered listed, no na HE PATENT (e of a single firm (having as storney or agent) and the nar patent attorneys or agents. If me will be printed. print or type)	a member a 2 nes of up to in name is 3	
"Fee Address" indicate PTO/SB/47; Rev 03-02 of Number is required. ASSIGNEE NAME AND	tion (or "Fee Address" Indic or more recent) attached. Us O RESIDENCE DATA TO 1	ation form se of a Customer BE PRINTED ON TI	(2) the name registered at 2 registered listed, no na HE PATENT (e of a single firm (having as storney or agent) and the nar patent attorneys or agents. If me will be printed. print or type)	a member a 2	
"Fee Address" indicate PTO/SB/47; Rev 03-02 of Number is required. ASSIGNEE NAME AND	tion (or "Fee Address" Indic or more recent) attached. Us O RESIDENCE DATA TO B s an assignee is identified b the 37 CFR 3.11. Completion	ation form se of a Customer BE PRINTED ON The selow, no assignee do of this form is NOT	(2) the name registered at 2 registered listed, no na HE PATENT (lata will appear a substitute for	e of a single firm (having as storney or agent) and the nar patent attorneys or agents. If me will be printed. print or type)	a member a 2 3 3 3 3 3 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
"Fee Address" indicate PTO/SB/47; Rev 03-02 Number is required. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN	tion (or "Fee Address" Indic or more recent) attached. Us O RESIDENCE DATA TO B s an assignee is identified b the 37 CFR 3.11. Completion	ation form the of a Customer BE PRINTED ON THE thelow, no assignee d of this form is NOT	(2) the name registered at 2 registered listed, no na HE PATENT (data will appear a substitute for RESIDENCE	e of a single firm (having as atomey or agent) and the nar patent attorneys or agents. It me will be printed. print or type) or on the patent. If an assign filing an assignment.	a member a 2 2 3 3 3 3 3 4 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6	
"Fee Address" indicate PTO/SB/47; Rev 03-02 Number is required. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN CHISSO PETROC	tion (or "Fee Address" Indic or more recent) attached. Us D RESIDENCE DATA TO It is an assignee is identified by 137 CFR 3.11. Completion EE HEMICAL CORPOR	ation form the of a Customer BE PRINTED ON THE thelow, no assignee d of this form is NOT	(2) the name registered at 2 registered listed, no na HE PATENT (data will appear a substitute for RESIDENCE (1)	e of a single firm (having as storney or agent) and the nar patent attorneys or agents. It me will be printed. print or type) or on the patent. If an assignment. c: (CITY and STATE OR CO	a member a 2 2 3 3 3 3 3 4 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6	
"Fee Address" indicate PTO/SB/47; Rev 03-02 Number is required. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN CHISSO PETROC CHISSO CORPOR	tion (or "Fee Address" Indic or more recent) attached. Us D RESIDENCE DATA TO Its an assignee is identified by a 37 CFR 3.11. Completion EE HEMICAL CORPOR ATION	ation form the of a Customer BE PRINTED ON The the of the form is NOT (B) ATION and	(2) the name registered at 2 registered listed, no na HE PATENT (lata will appear a substitute for (1)) (2)	e of a single firm (having as storney or agent) and the nar patent attorneys or agents. It me will be printed. print or type) or on the patent. If an assign filing an assignment. c: (CITY and STATE OR CO. Tokyo, Japan at Osaka, Japan	a member a nes of up to if no name is 3 nee is identified below, the country)	document has been filed to
"Fee Address" indicate PTO/SB/47; Rev 03-02 of Number is required. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in CHISSO PETROC CHISSO CORPOR case check the appropriate	tion (or "Fee Address" Indicor more recent) attached. Use the Address of the Addr	ation form the of a Customer BE PRINTED ON THE the of this form is NOT (B) ATION and orics (will not be printed on the pri	(2) the name registered at 2 registered listed, no na HE PATENT (lata will appear a substitute for (1)) (2)	e of a single firm (having as storney or agent) and the nar patent attorneys or agents. It may be printed. print or type) or on the patent. If an assign filing an assignment. (CITY and STATE OR CO. Tokyo, Japan at Osaka, Japan ent): Individual	a member a 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	document has been filed to
"Fee Address" indicate PTO/SB/47; Rev 03-02 of Number is required. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in CAINAME OF ASSIGN CHISSO PETROC CHISSO CORPOR case check the appropriate in The following fee(s) are	tion (or "Fee Address" Indicor more recent) attached. Use the Address of the Addr	ation form the of a Customer BE PRINTED ON The the of this form is NOT (B) ATION and orics (will not be printed)	(2) the name registered at 2 registered listed, no na HE PATENT (lata will appear a substitute for (1) (2) RESIDENCE (1) (2) Inted on the pat Payment of For A check in	e of a single firm (having as storney or agent) and the nar patent attorneys or agents. It me will be printed. print or type) or on the patent. If an assign filing an assignment. (CITY and STATE OR CO. Tokyo, Japan at Osaka, Japan cent): Individual (A.) Individual (A.) (CETY and STATE OR CO. Tokyo, Japan at Osaka, Japan cent): Individual (A.) (CETY and STATE OR CO. Tokyo, Japan at Osaka, Japan cent): Individual (A.) (CETY and STATE OR CO. Tokyo, Japan at Osaka, Japan cent): Individual (A.) (CETY and STATE OR CO. Tokyo, Japan at Osaka, Japan cent): Individual (A.)	a member a 2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	document has been filed to
"Fee Address" indicate PTO/SB/47; Rev 03-02 of Number is required. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in CHISSO PETROC CHISSO CORPOR dease check the appropriate at the following fee(s) are Essue Fee	tion (or "Fee Address" Indicor more recent) attached. Use an assignce is identified by 37 CFR 3.11. Completion EE CHEMICAL CORPOR ATION cassignce category or categorylosed:	ation form the of a Customer BE PRINTED ON The the of this form is NOT (B) ATION and orics (will not be printed)	(2) the name registered at 2 registered listed, no na HE PATENT (lata will appear a substitute for (1) (2) RESIDENCE (1) (2) Inted on the pat Payment of For A check in	e of a single firm (having as storney or agent) and the nar patent attorneys or agents. It me will be printed. print or type) or on the patent. If an assign filing an assignment. (CITY and STATE OR CO. Tokyo, Japan and Osaka, Japan cent): Individual	a member a 2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	document has been filed to
"Fee Address" indicate PTO/SB/47; Rev 03-02 of Number is required. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in CHISSO PETROC CHISSO CORPOR case check the appropriate at the following fee(s) are Essue Fee	tion (or "Fee Address" Indicor more recent) attached. Use DRESIDENCE DATA TO Be an assignee is identified by 37 CFR 3.11. Completion EE HEMICAL CORPOR ATION Consider the assignee category or category enclosed:	ation form the of a Customer BE PRINTED ON THE	(2) the name registered at 2 registered listed, no na HE PATENT (data will appear a substitute for (1)) (2) mted on the pate. Payment of For Payment by The Direct	e of a single firm (having as storney or agent) and the nar patent attorneys or agents. It me will be printed. print or type) or on the patent. If an assign filing an assignment. c: (CITY and STATE OR CO. Tokyo, Japan at Osaka, Japan ent): Individual (See(s)): the amount of the fee(s) is expected to card. Form PTO-203 for is hereby authorized by or agents.	a member a nes of up to it no name is 3 nee is identified below, the country) and Corporation or other private granelosed. (checomelosed. (checomelosed.)	roup entity Government of the
"Fee Address" indicate PTO/SB/47; Rev 03-02 (Number is required. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN CHISSO PETROC CHISSO CORPOR dease check the appropriate at the following fee(s) are problemated by the proposition of the following fee (S) are Publication Fee (No see Advance Order - # of the proposition of the following fee (S) are Advance Order - # of the following fee (No see Advance Order - # of the fee (No see Advance Order - # of the fee (No see Advance Order - # of the fee (No see Advance Order - # of the fee (No see Advance Order - # of the fee (No see Advance Order - # of the fee (No see Advance Order - # of the fee (No see Advance Order - # of the fee (No see Advance Order - # of the fee (No see Advance Order - # of the fee (No see Advance Order - # of the fee (No see Advance Order - # of the fee (No see Advance Order - # of the fee (No see Advan	tion (or "Fee Address" Indicor more recent) attached. Use the control of the cont	ation form se of a Customer BE PRINTED ON The selow, no assignee d of this form is NOT (B) ATION and orics (will not be printed)	(2) the name registered at 2 registered listed, no na HE PATENT (data will appear a substitute for RESIDENCE (1)) (2) nted on the pate. Payment of F. A check in Payment by	e of a single firm (having as storney or agent) and the nar patent attorneys or agents. It me will be printed. print or type) or on the patent. If an assign filing an assignment. c: (CITY and STATE OR CO. Tokyo, Japan at Osaka, Japan ent): Individual (See(s)): the amount of the fee(s) is expected to card. Form PTO-203 for is hereby authorized by or agents.	a member a 2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	roup entity Government of the
"Fee Address" indicate PTO/SB/47; Rev 03-02 (Number is required. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in CHISSO PETROC CHISSO CORPOR dease check the appropriate a. The following fee(s) are Publication Fee (No see Change in Entity Status	tion (or "Fee Address" Indicor more recent) attached. Use an assignee is identified by 37 CFR 3.11. Completion EE PHEMICAL CORPOR ATION assignee category or category category and the analysis of the country discount permitted for the country discount permitted for the category of category of category or category or category category or cate	ation form the of a Customer BE PRINTED ON THE	(2) the name registered at 2 registered listed, no na HE PATENT (data will appear a substitute for (1)) (2) (2) nted on the pat Payment of For Payment by The Direct Deposit According to the register of the payment by The Direct Deposit According to the Deposit According	e of a single firm (having as storney or agent) and the nar patent attorneys or agents. It me will be printed. print or type) or on the patent. If an assignment. c: (CITY and STATE OR CO. Tokyo, Japan at Osaka, Japan ent): Individual (See(s): the amount of the fee(s) is ended to the see of the amount of the fee(s) is ended to the see of the see o	a member a 2 2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	roup entity Government overpayment, teredit any overpayment, teopy of this form).
"Fee Address" indicate PTO/SB/47; Rev 03-02 (Number is required. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in CHISSO PETROC CHISSO CORPOR dease check the appropriate a. The following fee(s) are Publication Fee (No see Change in Entity Status Change in Entity Status Change in Entity Status Status Change in Entity Status Change Chang	tion (or "Fee Address" Indicor more recent) attached. Use the control of the cont	ation form the of a Customer BE PRINTED ON The clow, no assigned of this form is NOT (B) ATION and orics (will not be printed) and orics (will not be printed) and and orics (will not be printed) and and and and and and and a	(2) the name registered at 2 registered last 2 registered listed, no na HE PATENT (data will appear a substitute for (1)) (2) (2) (2) (2) (2) (2) (2) (2) (3) A check in Payment of Fill The Direct Deposit According to the pattern of the Deposit According to the Payment by	e of a single firm (having as storney or agent) and the nar patent attorneys or agents. It me will be printed. print or type) or on the patent. If an assignment. c: (CITY and STATE OR CO. Tokyo, Japan at Osaka, Japan ent): Individual (A) Coee(s): the amount of the fee(s) is endered a continuous of the fee(s) is endered at the continuous of the fee of the c	a member a 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	roup entity Government when the Government was been filed for the copy of this form).
"Fee Address" indicate PTO/SB/47; Rev 03-02 (Number is required. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in CHISSO PETROC CHISSO CORPOR dease check the appropriate a. The following fee(s) are Publication Fee (No see Change in Entity Status Change in Entity Status Change in Entity Status Status Change in Entity Status Change Chang	tion (or "Fee Address" Indicor more recent) attached. Use the control of the cont	ation form the of a Customer BE PRINTED ON The clow, no assigned of this form is NOT (B) ATION and orics (will not be printed) and orics (will not be printed) and and orics (will not be printed) and and and and and and and a	(2) the name registered at 2 registered last 2 registered listed, no na HE PATENT (data will appear a substitute for (1)) (2) (2) (2) (2) (2) (2) (2) (2) (3) A check in Payment of Fill The Direct Deposit According to the pattern of the Deposit According to the Payment by	e of a single firm (having as storney or agent) and the nar patent attorneys or agents. It me will be printed. print or type) or on the patent. If an assignment. c: (CITY and STATE OR CO. Tokyo, Japan at Osaka, Japan ent): Individual (A) Coee(s): the amount of the fee(s) is endered a continuous of the fee(s) is endered at the continuous of the fee of the c	a member a 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	roup entity Government with the Government of the Government of the Government, the Government, the Government, the Government of this form).
"Fee Address" indicate PTO/SB/47; Rev 03-02 (Number is required. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN CHISSO PETROC CHISSO CORPOR case check the appropriate and the following fee(s) are Publication Fee (No see Change in Entity Status and Applicant claims S	tion (or "Fee Address" Indicor more recent) attached. Use the control of the cont	ation form the of a Customer BE PRINTED ON The clow, no assigned of this form is NOT (B) ATION and orics (will not be printed) and orics (will not be printed) and and orics (will not be printed) and and and and and and and a	(2) the name registered at 2 registered last 2 registered listed, no na HE PATENT (data will appear a substitute for (1)) (2) (2) (2) (2) (2) (2) (2) (2) (3) A check in Payment of Fill The Direct Deposit According to the pattern of the Deposit According to the Payment by	e of a single firm (having as storney or agent) and the nar patent attorneys or agents. It me will be printed. print or type) or on the patent. If an assignment. c: (CITY and STATE OR CO. Tokyo, Japan at Osaka, Japan ent): Individual (A) Coee(s): the amount of the fee(s) is endered a continuous of the fee(s) is endered at the continuous of the fee of the c	a member a 2 2 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	roup entity Government out of the second of this form). FR 1.27(g)(2). ation identified above, the assignee or other party in the second of
"Fee Address" indicate PTO/SB/47; Rev 03-02 (Number is required. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN CHISSO PETROC CHISSO CORPOR case check the appropriate and the following fee(s) are Publication Fee (No see Change in Entity Status and Applicant claims S	tion (or "Fee Address" Indicor more recent) attached. Use the control of the cont	ation form the of a Customer BE PRINTED ON The clow, no assigned of this form is NOT (B) ATION and orics (will not be printed) and orics (will not be printed) and and orics (will not be printed) and and and and and and and a	(2) the name registered at 2 registered last 2 registered listed, no na HE PATENT (data will appear a substitute for (1)) (2) (2) (2) (2) (2) (2) (2) (2) (3) A check in Payment of Fill The Direct Deposit According to the pattern of the Deposit According to the Payment by	e of a single firm (having as storney or agent) and the nar patent attorneys or agents. It me will be printed. print or type) or on the patent. If an assignment. c: (CITY and STATE OR CO. Tokyo, Japan at Osaka, Japan ent): Individual (A) Coee(s): the amount of the fee(s) is endered a continuous of the fee(s) is endered at the continuous of the fee of the c	a member a 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	roup entity Government when some continuous continuous Government, the copy of this form). FR 1.27(g)(2). Strong identified above, the assignee or other party in the continuous continuo

an approximate. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FBES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.